FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐

County Resolution No. 2832 ☒

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

FILE NO. _____

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 9-11-95

The undersigned hereby applies for a permit to ALTER ☐, EXTEND ☐, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 8N; Range 6E; Section 19;
Block _____; Lot _____; Addition _____
Street Address 17205 SW 42nd

2. Property Use: Residential yes ☐; Commercial _____ ☐
No. Bedrooms 3-4 Describe _____
Other Use ☐
Describe _____

3. Type of existing Individual Sewage Disposal System: Septic Tank ☒; Other ☐

4. Description of proposed alteration, extension or repair: Shift from Lagoon to Septic

5. Work to be done by: Owner ☒; or Contractor ☐, _____
Contractor's Name

6. Estimated cost of project:

a. Materials	$ _____
b. Labor	$ _____
c. Other	$ _____
TOTAL	$ [illegible]

Cheryl Bohl
Signature of Applicant (owner or lessee)

Rt 1 Box 16 Martell, Ne
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ _____

2. Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved ☐; Disapproved ☐
by: _____

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ by: _____

003

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska (

REAL ESTATE TRANSFER/LOA

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: Lincoln-Lancaster County Health Department or LLCHD

☒ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

☒ Evaluation of the Individual Water System ☒ Evaluation of the Sewage Disposal System

Legal Description of Property: Street Address 17205 SW 42nd

Twp ~~13~~ 8 Range ~~6~~ 6E Section 19 1/4 ___ 1/4 ___ Block ___ Lot ___ Addition ___

Directions to Property 77 South to Hwy 33 - West - 3/4 So. West side

Location of Well West of old House Tap Location: Inside ☒ Outside ☒

Location of Sewage System SE Corner of New House Year Installed 1985

	NAME	ADDRESS	PHONE
Present Owner:	Daryl Bohl	Rt. 1 Box 16 Martell Ne 68404	794-4185
~~Tenant~~/Buyer:	Ray + Linda Wilson	2729 S. 40th Lincoln, Ne 68506	489 7640
Return to:			

Signature of Applicant Daryl Bohl Address Martell, Ne Rt. 1 Box 16 Date 9 / 11 / 95

HEALTH DEPARTMENT USE ONLY

Date Received 9 / 11 / 95 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 9 / 12 / 95

WATER SYSTEM:	Approved	Disapproved	**SEWAGE SYSTEM**	**Additional Site Visits**
Construction	☒	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☒	Date ___/___/___ by ___
Nitrate	☒ 20.1 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: SEWAGE SYSTEM AS SHOWN WOULD HAVE TO BE CONSIDERED AS EXPERIMENTAL PLUS IT WAS NOT INSPECTED AT TIME OF INSTALLATION. NO EVIDENCE OF MALFUNCTION. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY THEN IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☒ **SEWAGE DISPOSAL SYSTEM** Approved: ☐ Provisional Approval: ☒

Approved by Jerrold C. Hood R.E.H.S. Date 9 / 18 / 95

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

WATER MICROBIOLOGY

STATE LAB NO. 145-2130

COMPLETE INFORMATION BELOW

DATE COLLECTED 9 (MO) 12 (DAY) 95 (YEAR) 10:20 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION DARYL BOHL

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SE SECT 19 TWNSHP 8 N RANGE 6 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: ☒ MEMBRANE FILTER ☐ MPN

COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☒ THE WATER MEETS BACTERIOLOGICAL STANDARD

☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD

☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*

*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:

☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT

☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY RB

FOR ACCOUNTING USE ONLY

LWB 88

RECEIVED '95 SEP 12 A11:08

REPORTED '95 NOV 13 P3:07

'95 SEP 13 P3:40

RECEIVED

'95 SEP 12 A11:08

REPORTED

COMPLETE INFORMATION BELOW

WATER CHEMISTRY

STATE LAB NO. 155-8935

DATE COLLECTED 9 (MO.) 12 (DAY) 95 (YEAR) 10:20 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION DARYL BOHL

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SE SECT 19 TWNSHP 8 N RANGE 6 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

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ENVIRONMENTAL HEALTH
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LINCOLN, NEBRASKA 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

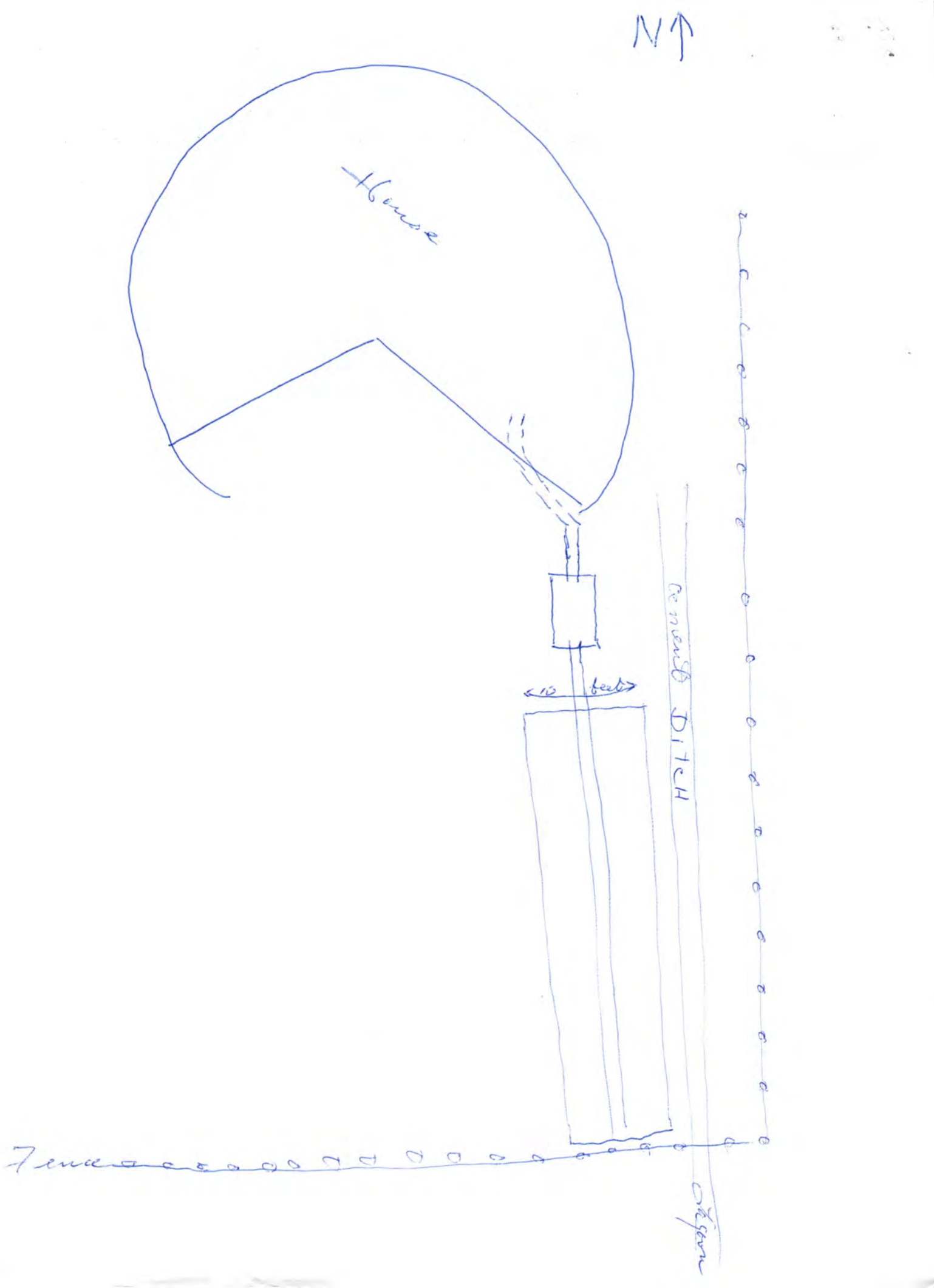
NITRATE — N less than 0.1 mg/l

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT ☐ DAMAGE ☐ IMPROPER CONTAINER

TEST(S) BY JW

FOR ACCOUNTING USE ONLY

LWN 88


N
House
Fence
Fence
Fence